

SUMMARY FORM
COLLECTIVE BARGAINING AGREEMENT
PUBLIC SECTOR / NON-POLICE & FIRE

Public Employer: Lower Alloways Creek Board of Education Employee Organization: LAC Support Staff
Base Year Contract Term: _____ New Contract Term: 7/1/11 - 6/30/14

Synopsis of Settlement/
Award/Recommendation: Required direct deposit, Agency Shop Provision added,

	<u>BASE YEAR</u> <i>(previous agreement)</i>	<u>NEW BASE YEAR</u> <i>(successor agreement)</i>
Salary:	_____	_____
Increment:	_____	_____
% Increase:	<u>0.00%</u>	<u>0.00%</u>
Avg. Yield	_____	_____
per person in dollars:	_____	_____
Uniforms:	_____	_____
Boot/Shoe:	_____	_____
Longevity:	_____	_____
Holiday Pay:	_____	_____
Shift Differential	_____	_____
Overtime:	_____	_____
Stipends:	_____	_____
Bonuses:	_____	_____
Education:	_____	_____
EMT:	_____	_____
Other*:	_____	_____

* Additional Costs: (please list on separate sheet & include in total)

Medical:

Contributions:	_____	_____
Cost of Health	_____	_____
Prescription	_____	_____
Dental:	_____	_____
Vision:	_____	_____

	<u>11-12</u> Year	<u>12-13</u> Year	<u>13-14</u> Year	<u>Year</u>
Effective Date	_____	_____	_____	_____
% Increase	<u>0.00%</u> <u>3.07%</u>	<u>0.00%</u> <u>2.75%</u>	<u>0.00%</u> <u>2.59%</u>	<u>0.00%</u>
Avg. Yield (p/p*)	<u>\$522.86</u>	<u>\$493.66</u>	<u>\$461.13</u>	_____
Cost of Increase:	_____	_____	_____	_____
Impact of Settlement:	_____	_____	_____	_____
Percentage Impact:	<u>0.00%</u>	<u>0.00%</u>	<u>0.00%</u>	<u>0.00%</u>
Actual dollar Impact:	_____	_____	_____	_____
TOTAL BASE SALARY AT END OF EACH YEAR	_____	_____	_____	_____

The undersigned certifies that the foregoing figures are true and is aware that if any of the foregoing items are false, s/he is subject to punishment.

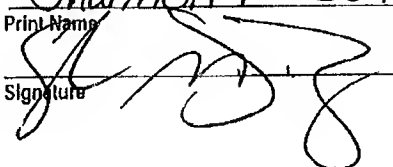
Prepared by:

Print Name

Signature

Title:

Date:

Shannon N. DuBois


Bus. Admin.

12/26/12